

Bartlett Regional Hospital

BOARD OF DIRECTORS

Agenda

August 26, 2014

5:15 p.m.

Administration Boardroom

Mission Statement

Bartlett Regional Hospital provides its community with quality, patient-centered care in a sustainable manner.

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|-------|--|-----------|
| I. | ROLL CALL | 5:15 p.m. |
| | • Introduction of Interim CFO, Cynthia Brandt – Kristen Bomengen | |
| II. | PUBLIC PARTICIPATION ON NON-AGENDA ITEMS | 5:20 p.m. |
| III. | SPECIAL ORDER OF BUSINESS | 5:25 p.m. |
| IV. | APPROVAL OF MINUTES from July 22, 2014 (Pg. 3) | 5:30 p.m. |
| | ***EXECUTIVE SESSION*** | |
| V. | MEDICAL STAFF REPORT (Pg. 9) | 5:35 p.m. |
| VI. | NEW BUSINESS | 6:05 p.m. |
| VII. | CONSENT AGENDA | |
| VIII. | STANDING COMMITTEE REPORTS | 6:10 p.m. |
| | A. Executive Committee – Kristen Bomengen (Pg. 11) | |
| | B. Finance Committee – Cynthia Brandt reports (Pg. 14) | |
| | C. Planning Committee – Dr. Peimann reports (Pg. 27) | |
| | D. Quality Council – Ms. Davis reports | |
| | E. Bartlett Foundation – Linda Thomas reports | |
| IX. | MANAGEMENT REPORTS | 6:20 p.m. |
| | • CEO – Chuck Bill reports | |
| X. | PRESIDENT’S REPORT – Kristen Bomengen reports | 6:30 p.m. |

- XI. BOARD EDUCATION – Chuck Bill reports**
- XII. SEPTEMBER BOARD CALENDAR (Pg. 29) 6:45 p.m.**
- XIII. BOARD COMMENTS AND QUESTIONS 6:50 p.m.**
- XIV. EXECUTIVE SESSION (if required)**
- ADJOURNMENT 7:00 p.m.**

Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900 www.bartletthospital.org

**Bartlett Regional Hospital
Board of Directors
Minutes
July 22, 2014**

Called to order at 5:18 p.m.

Roll call

Present

Kristen Bomengen	Robert Storer, Vice President
Nate Peimann, MD	Mary Borthwick
Mark Johnson	Alex Malter, MD
Nancy Davis, Secretary (by phone)	

Absent

Linda Thomas, past President
Lauree Morton

Others present

Chuck Bill, CEO	Mila Cosgrove, HR Director
Alan Germany, CFO	Billy Gardner, CNO
Toni Petrie, Executive Assistant	Dick Monkman, Hospital Atty.
Amy Dressel, MD	

Public participation – None

Special order of business – Mr. Bill introduced Cliff Hendren, who is in Juneau interviewing for the Chief Financial Officer position.

Approval of the minutes – *Ms. Borthwick made a MOTION to approve the minutes from the June 24, 2014 Board of Directors meeting. Mr. Johnson seconded. The minutes were corrected to reflect Ms. Davis was in attendance, not participating by phone and the approval of the minutes from the June 17th meeting, not the 7th.*

NEW BUSINESS: A list of CBJ Law projects from June was reviewed. Mr. Bill said we are working on streamlining the legal review process.

CONSENT AGENDA: None

STANDING COMMITTEE REPORTS:

The Executive Committee minutes were reviewed. Ms. Bomengen noted that there was final action taken on the Orthopedic ER call and the Hospitalist ER call agreements at this meeting.

Dr. Joanne Gartenberg's Physician Employment Contract was reviewed. This is a renewal contract. **Mr. Storer made a MOTION to approve the contract as presented. Mr. Johnson seconded and it was approved by a roll call vote.**

Dr. Ben Miller's Physician Employment Contract was reviewed. This is a renewal contract. **Mr. Storer made a MOTION to approve the contract as presented. Mr. Johnson seconded and it was approved by a roll call vote.**

Dr. Pam Gruchacz's contract amendment to allow her to continue to provide services to the Wrangell hospital, in addition to the hours she will be providing at BRH, was reviewed.

Ms. Borthwick made a motion to approve the amendment. Mr. Storer seconded and it was approved by a roll call vote.

Finance report – Mr. Germany reports.

There are two items for capital purchase up for approval. One is to upgrade three of our existing ventilators and to add one additional in the amount of \$54,980. Mr. Storer said he owns stock in Covidian, which is where we got the quote from, so he is recusing himself from the discussion and any consideration. We will be saving money from the previous quote which will be used to help purchase two CCU beds. **Dr. Malter made a MOTION to approve upgrading three existing ventilators and adding one additional ventilator. Mr. Johnson seconded and it was approved by a roll call vote.**

The other capital item is for two CCU beds. The quote is for \$85,741.48, which part of the savings from the ventilators will be used so we are able to purchase both beds. The plan is to replace the two oldest. They are 20 years old.

Dr. Malter made a MOTION to approve the purchase of the two CCU beds. Mr. Johnson seconded. The motion passed by a roll call vote.

Mr. Germany went over a pricing analysis re: the Medicare fee schedule. Our pricing for some items was lower than the fee schedule, therefore we were not being reimbursed as much as we could have been.

Mr. Bill said it was reported to him at an ASHNHA conference that the charges at Bartlett are quite a bit lower than anywhere else in the state.

Ms. Crane said that's not the public's perception and if that's true, the public needs to be made aware somehow.

Mr. Germany announced we signed the Meditech 6.1 contract. He showed pricing for the FY15-17 capital budget for the Meditech upgrade which includes the software, hardware, content vendors quality reporting tools, tablets, consulting and implementation fees.

We are hoping to get the RFP out next week for a consulting firm to help with implementation. We are still on track for our software delivery date of September 30, 2014.

Mr. Germany gave the June financial report;

Excess of revenues over expenses for the month of June 2014 was a negative \$1.28 million which was \$1.86 million worse than the budget of \$578,000. The reason for this significant loss in June was primarily due to a \$2.0 million write-off related to prior year Cerner fees (as Bartlett has decided to implement Meditech instead). The hospital's June performance brings the fiscal year actual to \$5.07 million which exceeds the budget of \$3.33 million by \$1.74 million or 52%.

Hospital volume saw an average of 26.7 patients per day in June. Rainforest Recovery Center's average daily census in June was 13.4 patients. Of the hospital census, the Mental Health Unit census averaged 9.3, a slight increase over May. Surgical cases totaled 267 in June, 38 cases lower than May. It appears that part of the reason surgical volume was lower in June related to vacation time/physicians away from the hospital. Emergency Department volume was strong in June at a total visit count of 1,400 or 46.7 average visits per day, the highest since last July.

Total operating revenue was \$7.3 million in June, \$162,000 less than budget. For the fiscal year, total operating revenue was \$86.82 million, \$3.29 million over budget. This included the impact of the unbudgeted electronic medical record incentive funds received in December 2013 of \$898,000. Higher than budgeted total revenue for the year also includes the impact of a reduced bad debt level than originally budgeted. Bad debt was \$1.69 million lower than budget for the year.

Total expenses were over budget for the month by \$2.1 million and includes the impact of the \$2.0 million Cerner write-off. For the fiscal year, total expenses were \$1.9 million over budget. Excluding the Cerner write-off, expenses for the month and total year were in line with budget.

Expense variance detail for the month of June includes:

- Salaries/Wages/Benefits: \$8,251 over budget, a variance of less than 0.2%
- The Cerner write-off directly impacted Supply Expense in the amount of \$2.42 million, specifically Computer Software which rolls up into the Supply Expense category. Prior to FY14, \$400,000 in Cerner fees had been previously

written off to Software Maintenance. Reversing that caused Repairs & Maintenance to show negative \$191,000 for the month.

- Interest expense: \$61,000 over budget as the FY14 interest expense related to the Bond Defeasance was not known in time for inclusion in the budget
- Other expense: \$42,000 over budget due to physician clinic lease income (reduction in expense) not meeting budgeted expectations

Operating cash was \$25.0 million as of June 30, 2014 and Days Cash on Hand was 168.

From an overall cash receipts and disbursements standpoint, for FY14 in total, cash was managed well, with receipts exceeding disbursements by \$7.8 million. Receipts totaled \$88.6 million versus disbursements of \$80.8 million.

June Net A/R Days was 90 and includes the impact of a slow-down from the state Medicaid program which is causing Medicaid Days in A/R to be 21 days higher than normal.

Audit update – Ms. Knock reports.

Ms. Knock gave an update on the stand alone audit. The audit will start on August 4th. Ms. Knock also informed the Board that we are also involved in a Medicare audit that started in March. There will be a pre-exit conference call for the Medicare audit on July 28th.

Dr. Peimann said it's not clear what the Medicare audit is. Mr. Germany said this goes back to fiscal 2011 and it relates to the pension supplement payment of the hospital employees through the State of Alaska PERS program.

BRH Foundation – Mr. Bill reports

They will be having a black tie gala in September. They approved the purchase of the climbing wall and children's entertainment carts. They are also approving to continue help funding the S.A.N.E. training. Mr. Bill announced that he recommended Rustan Burton from the Juneau Empire to be on the Foundation board, which he has accepted. There are still vacancies on the Foundation board.

Dr. Malter made a MOTION to go into executive session at 6:20 p.m., to discuss matters which are confidential by law. Ms. Borthwick seconded and it was approved.

Out of executive session at 6:24 p.m. No action was taken.

Dr. Peimann made a MOTION to approve the credentialing report as presented. Ms. Borthwick seconded and it was approved.

MANAGEMENT REPORT:

CEO report – Mr. Bill said that he has received a proposal from the company Focus and Execute that will be providing education at the Board's strategic planning retreat in October. He wanted to remind the Board that Dennis McMillian from The Foraker Group will be here on August 4th and invited any of the Board members that wish to participate in that meeting to attend. Mr. Bill is scheduled to speak at the Juneau Chamber of Commerce on Thursday, July 24th.

Mr. Bill asked the Board, with him being the face of the organization what they wanted as part of our involvement in community events.

Dr. Peimann said it's important for the hospital to promote health like we do with the blood draws, etc.

Mr. Storer said the Board needs to be sensitive because there are board members on this board that are on other boards, so think carefully when choosing organizations to help promote so it's not a conflict for the hospital.

Mr. Johnson said he feels the hospital should be involved in things that include health related things. He served on the school district budget and they talked a lot about cutting the nurses at the schools, so if Bartlett could look at those types of things as well.

Dr. Peimann said this discussion should start at the Executive Committee level. The hospital does a lot for the community, but we still have room to improve promoting what we offer to the community.

Mr. Bill said we had a visit from the Joint Commission and they found that the hospital was in compliance.

We recently received a program on a thumb drive from The American Hospital Association regarding Eliminating Harm and Improving Patient Care, and a Trustees Role in that process. Mr. Bill will take a look at it and let the Board know if he thinks it has value.

Mr. Bill announced we will have two CFO candidates onsite this week.

President's report – Ms. Bomengen said July was a busy month for board members and staff, so there were no meetings held other than this one, but she looks forward to having a very productive August.

August board calendar was reviewed – The Planning Committee was moved to August 21st.

BOARD COMMENTS:

Dr. Peimann said it's important to recognize we are halfway through cruise ship season and the staff are doing a great job of working hard and he wanted to thank the staff and Administration.

Adjourned. 6:50 p.m.

Board Secretary

DRAFT

Credentials Committee
Hospital Privileges for the Board of Director's Consideration
Tuesday, August 26, 2014 5:15 p.m. – Robert F. Valliant Center Boardroom

NEW APPOINTMENTS TO THE MEDICAL STAFF:

<u>Name</u>	<u>Category</u>	<u>Privileges In</u>
1. Emily Bos, DO	Active	Family Medicine w/OB

Dr. Emily C. Bos graduated from the Kansas City College of Osteopathic Medicine in 2011. Dr. Bos is a physician for SEARHC - Cedar.

REAPPOINTMENTS TO THE MEDICAL STAFF:

<u>Name</u>	<u>Category</u>	<u>Privileges In</u>
1. Carlton Heine, MD	Courtesy	Emergency Medicine and Bedside Ultrasound

Dr. Carlton E. Heine graduated from the Oregon Health Sciences University School of Medicine in 2003. Dr. Heine is an emergency medicine physician for BRH Emergency Department.

2. Alex D. Malter, MD	Active	Internal Medicine and Exercise Stress Treadmill
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Dr. Alex D. Malter graduated from the Oregon Health Sciences University School of Medicine in Portland, OR in 1988. Dr. Malter is an internal medicine physician for Family Practice Physicians.

REQUEST FOR WITHDRAWAL:

1. Cathryn Chicola, MD – (Consulting; RAPC; Teleradiology)
2. Mary Owen, MD – (Active – SEARHC; Family Medicine w/OB)

CHANGE OF STATUS:

1. Susan Hunter-Joerns, MD – (Active to Access to Services)

LOCUM TENENS:

1. Justin Clark, MD – (Self; General Surgery, Lap Cholecystectomy/Appendectomy, Bariatric, Sentinel Node Biopsy, Endoscopy, EGD, Pancreatectomy, Parathyroidectomy, and PEG)
2. Ann J. Vogt, MD – (VMC; Family Medicine w/OB and Conscious Sedation)

REQUEST TO CLOSE FILE:

1. William Wood, MD – (Active - Self; Anesthesia)

TELERADIOLOGY:

1. Benjamin Strong, MD – (Consulting – vRad; Teleradiology)

MEDICAL STUDENT:

1. **Takashi Sakano, MSIII** – (University of WA SOM/BRH MHU/BOPS; Evaluate and Treat Patients, History and Physicals, Draw Blood, Start IV's and other Minimally Invasive Procedures, Scrub in and Participate in Surgery, Assist in Labor/Delivery Under Direct Supervision of Sponsoring Physicians Per Policy 9500.105)

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Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900

www.bartlethospital.org

Executive Committee August 4, 2014

CALL TO ORDER 12:08 p.m.

ATTENDANCE: Kristen Bomengen, Bob Storer, Mary Borthwick and Linda Thomas

ALSO IN ATTENDANCE: Chuck Bill, CEO, Alan Germany, CFO, Billy Gardner, CNO, Mila Cosgrove, HR, Jane Sebens, CBJ Law, Toni Petrie, Executive Assistant and Dennis McMillian, The Foraker Group

CBJ LEGAL REPORT: Ms. Sebens addressed the legal documents that CBJ Law reviewed in July. Mr. Storer asked how the relationship is working between the hospital attorney and CBJ Law. Ms. Sebens said there still needs some work to get the process more streamlined and to which attorney should be doing what review.

Mr. Bill said we have made progress and have been working with the managers on this process. We are also looking for software that does contract management.

Ms. Bomengen asked how much of the list is handled by both attorneys. Ms. Sebens said a lot. We need to get a template in place, for example in the physician contracts and once the standardized language is in the contracts, there won't have to be a lot to review. She doesn't feel there are duplications happening and that both attorneys have something to offer.

ER CALL UPDATE: Mr. Bill said we are moving forward on the agreements. Neither contracts are fully executed yet. The verbiage needs to be looked at again on both contracts and revised. The orthopedics would like to be contracted as individuals and not as a group. Ms. Bomengen asked if we do individual contracts, could the hospital be at risk about not having coverage. Mr. Bill said it could. Ms. Thomas said it's a one year contract and if we move forward and find it's not working or being abused, we can void the contract.

BOARD EDUCATION: Mr. McMillian attended the meeting to address the strategic planning retreat in October. He will be at the retreat to help get the Board all on the same page. He will be back in Juneau a couple times before the

retreat and meet with certain constituencies to get their views and input such as the Assembly, physician groups and other key leadership people to listen to what they have to say and he will present that at the beginning of the retreat.

Ms. Thomas asked if this is part of the normal process or is it being driven by our president or our CEO. The initial request came from Dr. Nate Peimann. Mr. McMillian said it's not uncommon for organizations that have a broad community impact to do this. Ms. Thomas said she thought we were going to come out of the retreat with a better focus for the board, not pulling the Board together.

Ms. Bomengen said she feels it's important in pulling the Board together and to make a plan to work together as a board. Mr. Bill said part of this process is to have the board set the strategic planning goals, but stay out of the more day to day operations.

Mr. Bill said David Sandberg from Focus and Executive, will also be in attendance at the retreat. He will then meet with the Senior Leadership and then the plan will be brought back to the Board for ratification.

Ms. Bomengen said she will be working with Ms. Davis to identify some people to work with him. Mr. McMillian said we would spend some time at the beginning of the meeting to discuss strategy of moving back into a stronger governance model. The rest of the day will be spent looking at the key strategic areas as to where the Board wants to go in the future that can be measured. At the end of the day there will be a document that will have the strategic direction, but not a total strategic plan.

HR REPORT: Ms. Cosgrove reported on the annual state of the workforce plan, which included an overview of accomplishments of the FY15 goals.

This report is intended to meet Joint Commission requirement to

There was also turnover data presented that used to be done at the Planning Committee, but it was decided to move that document to the Executive Committee.

Mr. Storer asked how the turnover compares to the City and the State. Ms. Cosgrove said there's a higher level of turn and churn compared to most organizations that she's seen. She said we do have an opportunity to improve in some areas. Ms. Thomas said it would be helpful to see a breakdown of who retired and who just left for other reasons.

Ms. Bomengen asked Ms. Cosgrove what type of supervisor training they received. Ms. Cosgrove explained the Supervisory Academy. It's a 5 day class for the directors and management staff. It goes over basic supervision, employment law, how to effectively communicate, effective performance management strategies, how to assign and delegate, etc.

Ms. Thomas asked about the last leadership training we had was done by Roger Reece and asked what the difference is between the two types of training. Ms. Cosgrove said both trainings “dovetail” fairly well together. Rogers training was more about communication styles.

Ms. Cosgrove reported we are looking at revising the evaluation process.

Ms. Thomas asked about the timeframe for the Complete Personnel Rule project through adoption by Assembly. Ms. Cosgrove said FY15, but hopefully sooner than that. Ms. Thomas said there are several ordinances the Board needs to review and she was just wondering if these could be done in conjunction with the CBJ.

Ms. Cosgrove reported on the annual competencies. She said Staff Development tracks them for our employees and sees that they all get completed.

Ms. Thomas asked if there are any reports that come out and show if we are out of compliance. Mr. Gardner said it comes through our API system and if you are missing a competency that is required to do your job, the timecard system will not allow the employee to badge in.

CFO recruitment update – We had two candidates onsite for interviews. We offered a job to one of them and he declined. We are going to look for an interim CFO and start looking again. Ms. Bomengen asked if there are other approaches we can take. Ms. Cosgrove said we didn’t receive anything from recruiters and we may get a different bucket of applicants.

CEO evaluation – Ms. Bomengen said the Executive Committee hasn’t yet had a chance to put together a mechanism to address the CEO hiring contract provisions. She has looked at previous evaluation tools, but hasn’t found that they fulfill the task. Ms. Thomas said she would like to have something presented to the Executive Committee, rather than the committee coming up with it.

The expectation is to have something to act on at the next Executive Committee meeting in September.

Meeting adjourned at 1:10 p.m.

Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900
www.bartletthospital.org

Finance Committee August 21, 2014 Minutes

Attendance: Lauree Morton, Linda Thomas, Robert Storer and (via telephone) Kristen Bomengen

Absent: Alex Malter, MD

Also in attendance: Chuck Bill, CEO, Billy Gardner, CNO, Alan Germany, Interim CFO (Via Telephone), Cynthia Brandt, Interim CFO, Marise Knock, Controller, Bethany Rogers, Quality Risk Director, Martha Palicka, IT Director, Mila Cosgrove, HR Director, Robyn Free, Diagnostic Imaging/RT Director, Tami Lawson-Churchill, PFS Director, Dawn Bailey OR Director and Anita Moffitt, Executive Assistant.

Ms. Morton called the meeting to order at 5:15 p.m.

Ms. Morton made an amendment to the agenda to move the Q-Centrix and Press Ganey contracts to the top of the agenda.

Mr. Bill introduced Cynthia Brandt as a returning interim CFO. Mr. Germany and Ms. Knock have been working with Ms. Brandt to help with a smooth transition.

Ms. Knock recognized the staff in attendance.

OLD BUSINESS:

Q-Centrix Agreement – Ms. Rogers said this contract will allow us to outsource our core measure abstraction data. This data is sent to CMS and Joint Commission. Some of our reimbursements are based on participation in this program.

Rationale:

- Concurrent abstraction trial met with ongoing technology difficulties that contributed to delayed abstraction or missed cases.
- Concurrent abstraction trial did not ultimately fit into workflow, and so became an add-on task with multiple abstractors working on a particular case, leading to disagreement in case abstraction ownership.
- Varying interpretation of abstraction guidelines between multiple abstractors led to abstraction inaccuracies. Abstraction validation accuracy of at least 75% is required for full pay-for participation Medicare reimbursement, with approximately \$28,000 at risk (2% Medicare APU) for <75% accuracy findings.

- 0.5 FTE who had previously performed retrospective abstraction was unable to discharge Nurse Reviewer role to perform PI Coordinator role, leading to inefficient and unplanned use of FTE, also resulting in organizational loss due to not meeting organizational needs for process improvement.

Vendor Choice: Q-Centrix

- In business since 2010
- 90-100% CDAC Validation accuracy rate
- Lowest pricing model compared to 3 other vendors

Pricing: (see attachments)

Volume-Based Abstraction Estimate for 16 Measure Sets:	\$37,000 (annual)
BRH scanner for patient records:	\$ 1,000 (one-time)

Initial Year: \$38,000

Subsequent Years: \$37,000

Term: 3 years

Notes:

The contract has been reviewed and approved by CBJ Legal and approved by the Board Finance Committee

Ms. Morton noted that this is under the amount needed to be forwarded to the Board of Directors for approval but will be relayed as informational only.

Press Ganey Amendment: Ms. Rogers explains that this contract expands our current data entry services from Press Ganey to include the HBIPS (inpatient psychiatric care) measures that we are required to submit to CMS in order to receive our full reimbursement for inpatient psychiatric cases. Failure to submit these data will result in a 2% reduction in payment. This data submission requirement is new as of FY14.

Pricing: (see attachments)

Fees will be prorated and invoiced quarterly
 Retroactive submissions to cover time periods 4/1/13- 6/30/14 \$2,000 (one time)

Initial Year: \$10,000

Subsequent Years: \$8,000

Ms. Morton noted that this is under the amount needed to be forwarded to the Board of Directors for approval but will be relayed as informational only.

Meditech Update – Ms. Palicka informed the committee that the Hardware has been purchased from Park Place International for the Meditech upgrade. After reviewing proposals, Park Place International was chosen over Lumenate, the only other Meditech certified vendor available after Dell dropped out. Park Place is our current vendor for our Magic platform. The purchase price of \$529,245 is \$30,000 over for the amount

budgeted for hardware but with the excess amount of \$75,000 reserved for software, we are still under budget for the project.

Ms. Thomas asked for clarification of the costs as the presentation slide has not been updated. An update was given and a new slide will be presented at next month's meeting.

We are still working on the consulting/implementation vendor selection. We have had 4 vendors respond to the RFP. Scoring of the responses will begin tomorrow with the plan of narrowing the selection down to 2 vendors. The final vendors will be re-evaluated on Monday. The evaluating group is made up of people from across multiple areas in the hospital

Ms. Thomas asked what the process was for the RFP and if Cornerstone Health, the consultant we had hired to help us with the process would be involved in the decision making. Ms. Palicka explained that since the RFP was conducted with CBJ purchasing, we will not be informed which 4 vendors have responded until tomorrow morning. Cornerstone will not be helping in the selection process since they are one of the potential respondents. Even though Ms. Brandt has Meditech expertise, Ms. Thomas expressed discomfort that there will not be anyone outside of the hospital involved in the selection. Ms. Thomas has requested that Mr. Bill find out if this needs to go back to the assembly for final approval.

Mr. Germany praised Ms. Palicka and the team that was involved in this Meditech upgrade process to date.

Financial Statement Audit – Ms. Knock informed the committee that the audit is still ongoing. Ms. Thomas has indicated that Max Mertz would like to meet with the Board of Directors (BOD) in executive session to find out if there is anything the BOD would like them to delve into deeper.

Medicare Audit – Ms. Knock reported that CAHABA has until the end of August to wrap up their audit of the FY11 Cost report. There are some challenges, on behalf of the PERS pension payments. If PERS is disallowed, it will have implications all across Alaska. We do have money in reserve just in case.

Capital Budget list FY15 – Ms. Knock went over the FY15 Capital Budget summary. (See attached) List will be further refined for next month's meeting to include actual purchase prices of purchased items.

New Business:

July Financials – Ms. Knock reported. (See attached)

A/R days are 93 currently.

Holiday Bonuses – Mr. Bill is to research what has been done in past years and will make a recommendation to the planning committee and the BOD.

Union Contract Negotiations – Ms. Cosgrove reported that our wage and compensation study is still ongoing. Our current contract expires December 31, 2014. Wages are valid through June 30, 2015.

Capital Purchase Item:

GE Flashpad conversion kit – This will allow us to perform an upgrade to our existing x-ray equipment in room 1 without doing a complete equipment replacement. It essentially uses the existing system but makes it a digital (no cassettes required) system where the images are ready for viewing and QA immediately, no waiting for electronic processing. The original amount requested in the budget was \$125,000.00. The GE representative has gotten it to \$108,400.00 if we provide a PO before the end of August.

Ms. Thomas made a recommendation to move the purchase of the GE Flashpad conversion kit to the full board for approval. Purchase not to exceed \$109,000. Ms. Bomengen seconded. The motion was approved.

Meeting adjourned at 6:20 p.m.

Bartlett Regional Hospital July 2014 Financial Operating Summary

Excess of revenues over expenses for the month of July 2014 was \$210,500 which was \$8,000 better than budget of \$202,507.

Gross revenue for the month of July was \$12.7 million; which was above budget by \$209,000. Contractual adjustments and bad debt expense were over budget resulting in net revenue of \$7.1 million; which was below budget by \$554,000. Each balance sheet line item related to contractual allowances was fully reviewed and carefully evaluated due to doubtful accounts.

Volume has been picking up due to the tourist season. Hospital admissions in July were 210. Mental Health Unit average daily census has increased over the last two months with July at 9.58. Surgical volume has been increasing over the last two months and was higher than prior year. Emergency Department visits were 1,531 during the month of July; which is higher than prior year with 1,406 visits. Ancillary volumes have been increasing, too. CT volume was 333, Radiology was 818, Ultrasound was 536 and MRI volume was 126 in July; which is higher than prior months. Deliveries were 30; which were slightly less than one per day.

The volume variances noted above resulted in gross inpatient charges above budget by \$380,000 and outpatient charges below budget by \$141,000.

Total Expenses were under budget for the month of July by 7.0 %.

Variances include:

- Salaries/Wages/Benefits: \$193,000 under budget in July, overtime was slightly over budget at 4.4%
- Fees Physician: \$87,000 under budget due to Dr. Gruchacz's status change from full-time to part-time employee in the month of July
- Supplies: \$91,600 over budget due to negative variances in Drugs (\$34k), Dept Supply N/C (\$34k) and Computer Software (\$25k)
- Utilities: \$83,400 under budget due to a new fuel pricing contract via CBJ with Delta Western. Electricity was expected to be lower in July due to the summer season
- Insurance: \$15,200 lower than budget due to malpractice insurance; which was lower than anticipated due to Dr. Gruchacz's status change; which decreased the insurance liability
- Depreciation & Amortization: \$69,200 below budget due to fully depreciated system software
- Other expenses: \$45,400 under budget due to the timing of professional education and travel; which are usually utilized during the months of lower volume in the hospital

Operating cash was \$25.2 million as of July 31, 2014 and Days Cash on Hand was 150.

Cash receipts totaled \$7.0 million in July, \$303,000 more than the cash disbursed in July. This is the fourth month in a row that cash receipts have exceeded disbursements, indicating a continuing solid control over financial operations.

Net A/R Days was 93, which was higher than normal due to continuing adjustments in allowances for doubtful accounts and continuing challenges with the state's Medicaid payment processing.

BARTLETT REGIONAL HOSPITAL
 STATEMENT OF REVENUES AND EXPENSES
 FOR THE MONTH AND YEAR TO DATE OF JUL 14

MTD ACTUAL	MTD BUDGET	MTD \$ VAR	MTD % VAR	PRIOR YR MTD ACTUAL		YTD ACTUAL	YTD BUDGET	YTD \$ VAR	YTD % VAR	PRIOR YTD ACTUAL	PR YTD % VAR
Gross Patient Revenue:											
2,385,871	2,087,845	298,026	14.3%	1,950,401	1. Inpatient Revenue - Routine	2,385,871	2,087,845	298,026	14.3%	1,950,401	18.3%
2,604,860	2,523,410	81,450	3.2%	2,907,286	2. Inpatient Revenue - Ancillary	2,604,860	2,523,410	81,450	3.2%	2,907,286	(11.6)%
4,990,731	4,611,255	379,476	8.2%	4,857,687	3. Total Inpatient Revenue	4,990,731	4,611,255	379,476	8.2%	4,857,687	2.7%
5,892,744	6,033,622	(140,879)	(2.3)%	5,402,835	4. Outpatient Revenue	5,892,744	6,033,622	(140,879)	(2.3)%	5,402,835	8.3%
10,883,475	10,644,877	238,598	2.2%	10,260,522	5. Total Patient Revenue - Hospital	10,883,475	10,644,877	238,598	2.2%	10,260,522	5.7%
402,239	428,860	(26,621)	(6.2)%	387,983	6. RRC Revenue	402,239	428,860	(26,621)	(6.2)%	387,983	3.5%
1,381,906	1,384,832	(2,926)	(0.2)%	1,379,852	7. Physician Revenue	1,381,906	1,384,832	(2,926)	(0.2)%	1,379,852	0.1%
12,667,620	12,458,569	209,051	1.7%	12,028,356	8. Total Gross Patient Revenue	12,667,620	12,458,569	209,051	1.7%	12,028,356	5.0%
Deductions from Revenue:											
4,434,284	3,633,652	(800,632)	(22.0)%	3,304,626	9. Contractual adjustments	4,434,284	3,633,652	(800,632)	(22.0)%	3,304,626	(25.5)%
		0	0.0%		10. Prior year settlements			0	0.0%		0.0%
156,071	14,838	(141,233)	(951.8)%	11,804	11. Other deductions	156,071	14,838	(141,233)	(951.8)%	11,804	(92.4)%
158,768	269,318	110,550	41.0%	228,807	12. Charity care	158,768	269,318	110,550	41.0%	228,807	44.1%
773,752	841,618	67,866	8.1%	1,009,169	13. Bad debt expense	773,752	841,618	67,866	8.1%	1,009,169	30.4%
5,522,875	4,759,426	(763,449)	(16.0)%	4,554,406	14. Total deductions from revenue	5,522,875	4,759,426	(763,449)	(16.0)%	4,554,406	(17.5)%
7,144,745	7,699,143	(554,398)	(7.2)%	7,473,951	15. Net patient revenue	7,144,745	7,699,143	(554,398)	(7.2)%	7,473,951	(4.6)%
156,223	132,529	23,694	17.9%	178,123	16. Other operating revenue	156,223	132,529	23,694	17.9%	178,123	(14.0)%
7,300,968	7,831,672	(530,704)	(6.8)%	7,652,074	17. Total operating revenue	7,300,968	7,831,672	(530,704)	(6.8)%	7,652,074	(4.8)%
EXPENSES:											
3,073,835	3,157,873	84,038	2.7%	2,937,486	18. Salaries and wages	3,073,835	3,157,873	84,038	2.7%	2,937,486	(4.4)%
1,437,738	1,546,947	109,209	7.1%	1,394,896	19. Employee benefits	1,437,738	1,546,947	109,209	7.1%	1,394,896	(3.0)%
526,038	613,151	87,113	14.2%	546,378	20. Fees - Physician	526,038	613,151	87,113	14.2%	546,378	3.9%
319,407	356,206	36,799	10.3%	147,702	21. Fees - Other	319,407	356,206	36,799	10.3%	147,702	(53.8)%
856,987	765,414	(91,573)	(12.0)%	647,733	22. Supplies	856,987	765,414	(91,573)	(12.0)%	647,733	(24.4)%
108,843	192,226	83,384	43.4%	146,211	23. Utilities	108,843	192,226	83,384	43.4%	146,211	34.3%
160,782	236,901	76,119	32.1%	175,298	24. Repairs & maintenance	160,782	236,901	76,119	32.1%	175,298	9.0%
35,498	36,474	977	2.7%	30,797	25. Rentals & leases	35,498	36,474	977	2.7%	30,797	(13.2)%
39,834	55,055	15,221	27.6%	48,405	26. Insurance	39,834	55,055	15,221	27.6%	48,405	21.5%
577,717	646,887	69,170	10.7%	574,786	27. Depreciation & amortization	577,717	646,887	69,170	10.7%	574,786	(0.5)%
57,343	84,641	27,298	32.3%	162,367	28. Interest expense	57,343	84,641	27,298	32.3%	162,367	183.2%
31,193	76,592	45,399	59.3%	24,791	29. Other expenses	31,193	76,592	45,399	59.3%	24,791	(20.5)%
7,225,214	7,768,367	543,153	7.0%	6,836,848	30. Total expenses	7,225,214	7,768,367	543,153	7.0%	6,836,848	(5.4)%
75,754	63,305	12,449	19.7%	815,225	31. Income (loss) from operations	75,754	63,305	12,449	19.7%	815,225	(976.1)%

RUN DATE: 08/20/14
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Bartlett Regional Hosp. GL **LIVE**

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BARTLETT REGIONAL HOSPITAL
 STATEMENT OF REVENUES AND EXPENSES
 FOR THE MONTH AND YEAR TO DATE OF JUL 14

MTD ACTUAL	MTD BUDGET	MTD \$ VAR	MTD % VAR	PRIOR YR MTD ACTUAL		YTD ACTUAL	YTD BUDGET	YTD \$ VAR	YTD % VAR	PRIOR YTD ACTUAL	PR YTD % VAR
					Non-operating revenue						
3.589	6.673	(3.084)	(46.2)%	10.578	32. Interest income - general	3.589	6.673	(3.084)	(46.2)%	10.578	(194.7)%
131.107	132.529	(1.422)	(1.1)%	156.456	33. Other non-operating revenue	131.107	132.529	(1.422)	(1.1)%	156.456	(19.3)%
<u>134.697</u>	<u>139.202</u>	<u>(4.506)</u>	<u>(3.2)%</u>	<u>167.033</u>	34. Total non-operating revenue	<u>134.697</u>	<u>139.202</u>	<u>(4.506)</u>	<u>(3.2)%</u>	<u>167.033</u>	<u>(24.0)%</u>
210.451	202.507	7.944	3.9%	982.259	35. Excess (deficit) of revenues over expenses	210.451	202.507	7.944	3.9%	982.259	(366.7)%
<u>210.451</u>	<u>202.507</u>	<u>7.944</u>	<u>3.9%</u>	<u>982.259</u>		<u>210.451</u>	<u>202.507</u>	<u>7.944</u>	<u>3.9%</u>	<u>982.259</u>	<u>(366.7)%</u>

**Bartlett Regional Hospital
Dashboard Report for July 2014**

Facility Utilization:	CURRENT MONTH			YEAR TO DATE		
	Actual	Prior Year	Budget	Actual	Prior Year	Budget
<i>Inpatient: Patient Days</i>						
Patient Days - Med/Surg	365	381	365	365	381	365
Patient Days - Critical Care Unit	92	65	70	92	65	70
Avg. Daily Census - Acute	14.74	14.39	14.03	14.74	14.39	14.03
Patient Days - Obstetrics	83	102	95	83	102	95
Patient Days - Nursery	59	78	80	59	78	80
Births	30	39	33	30	39	33
Patient Days - Mental Health Unit	297	314	282	297	314	282
Avg. Daily Census - MHU	9.58	10.13	9.10	9.58	10.13	9.10
<i>Inpatient: Admissions</i>						
Med/Surg	79	101	78	79	101	78
Critical Care Unit	33	38	34	33	38	34
Obstetrics	33	46	36	33	46	36
Nursery	30	39	36	30	39	36
Mental Health Unit	35	40	35	35	40	35
<i>Surgery:</i>						
Inpatient Surgery Cases	63	67	85	63	67	85
Same Day Surgery Cases	202	174	150	202	174	150
Total Surgery Cases	265	241	235	265	241	235
Total Surgery Minutes	18,832	16,527	20,920	18,832	16,527	20,920
<i>Outpatient:</i>						
Total Outpatient Visits (Hospital)						
Emergency Department Visits	1,531	1,406	1,401	1,531	1,406	1,401
Cardiac Rehab Visits	14	28	42	14	28	42
Lab Tests	8,700	8,501	8,720	8,700	8,501	8,720
Radiology Procedures	2,285	2,396	2,276	2,285	2,396	2,276
Sleep Studies	23	24	17	23	24	17
<i>Rain Forest Recovery:</i>						
Patient Days - RRC	449	408	435	449	408	435
Avg. Daily Census - RRC	14.48	13.16	14.03	14.48	13.16	14.03
Outpatient visits	366	384	N/A	366	384	N/A
<i>Physician Clinics:</i>						
Specialty Clinic Visits	958	1,101	992	958	1,101	992
<i>Other Operating Indicators:</i>						
Dietary Meals Served	19,687	22,378	21,985	19,687	22,378	21,985
Laundry Pounds (Per 100)	368.45	333.79	345.21	368.45	333.79	345.21
<i>Financial Indicators:</i>						
Revenue Per Adjusted Patient Day	6,577.17	6,807.22	5,746.57	6,577.17	6,807.22	5,746.57
Contractual Allowance %	36.24%	27.57%	29.28%	36.24%	27.57%	29.28%
Bad Debt & Charity Care %	7.36%	10.29%	8.92%	7.36%	10.29%	8.92%
Wages as a % of Net Revenue	38.07%	33.92%	36.41%	38.07%	33.92%	36.41%
Staff Hours Per Adjusted Patient Day	40.24	42.35	35.65	40.24	42.35	35.65
Overtime/Premium % of Productive	4.40%	6.19%	3.50%	4.40%	6.19%	3.50%
Days Cash on Hand	150	162	149	150	162	149
Days in Net Receivables	93	70	55	93	70	55

RUN DATE: 08/20/14
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Bartlett Regional Hosp. GL **LIVE**

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BARTLETT REGIONAL HOSPITAL
 BALANCE SHEET
 AS OF JUL 14

	JUL 14	JUN 2014	JUN 2014	CHANGE FROM PRIOR YEAR
ASSETS				
Current Assets:				
1. Cash and cash equivalents	25,309,646	25,018,183	25,018,183	291,463
2. Board designated cash	12,887,456	13,129,562	13,129,562	(242,105)
3. Patient accounts receivable, net	21,585,712	21,593,444	21,593,444	(7,732)
4. Other receivables	615,296	553,175	553,175	62,121
5. Inventories	1,565,304	1,597,091	1,597,091	(31,787)
6. Prepaid Expenses	966,913	863,892	863,892	103,021
7. Other assets	0	0	0	0
8. Total current assets	<u>62,930,328</u>	<u>62,755,346</u>	<u>62,755,346</u>	<u>174,982</u>
Appropriated Cash:				
9. CAMHU and other funds	<u>5,484,920</u>	<u>5,484,920</u>	<u>5,484,920</u>	<u>0</u>
Property, plant & equipment				
10. Land, bldgs & equipment	145,545,875	145,275,084	145,275,084	270,792
11. Construction in progress	251,890	0	0	251,890
12. Total property & equipment	<u>145,797,765</u>	<u>145,275,084</u>	<u>145,275,084</u>	<u>522,682</u>
13. Less: accumulated depreciation	<u>(76,569,599)</u>	<u>(75,991,882)</u>	<u>(75,991,882)</u>	<u>(577,717)</u>
14. Net property and equipment	<u>69,228,167</u>	<u>69,283,202</u>	<u>69,283,202</u>	<u>(55,036)</u>
15. Total assets	<u><u>137,643,415</u></u>	<u><u>137,523,469</u></u>	<u><u>137,523,469</u></u>	<u><u>119,946</u></u>

BARTLETT REGIONAL HOSPITAL
 BALANCE SHEET
 AS OF JUL 14

	JUL 14	JUN 2014	JUN 2014	CHANGE FROM PRIOR YEAR
LIABILITIES & FUND BALANCE				
Current liabilities:				
16. Payroll liabilities	1,209,694	866,812	866,812	342,882
17. Accrued employee benefits	2,494,243	2,539,235	2,539,235	(44,993)
18. Accounts payable and accrued expenses	2,055,533	1,706,263	1,706,263	349,270
19. Due to 3rd party payors	705,834	685,000	685,000	20,834
20. Deferred revenue	143,736	539,986	539,986	(396,251)
21. Interest payable	0	388,005	388,005	(388,005)
22. Note payable - current portion	725,000	725,000	725,000	0
23. Other payables	784,963	738,897	738,897	46,066
24. Total current liabilities	<u>8,119,002</u>	<u>8,189,198</u>	<u>8,189,198</u>	<u>(70,196)</u>
Long-term Liabilities:				
25. Bonds payable	22,095,000	22,095,000	22,095,000	0
26. Bonds payable - premium/discount	2,465,663	2,485,971	2,485,971	(20,308)
27. Total long-term liabilities	<u>24,560,663</u>	<u>24,580,971</u>	<u>24,580,971</u>	<u>(20,308)</u>
28. Total liabilities	32,679,665	32,770,169	32,770,169	(90,504)
29. Fund Balance	<u>104,963,750</u>	<u>104,753,299</u>	<u>104,753,299</u>	<u>210,451</u>
30. Total liabilities and fund balance	<u>137,643,415</u>	<u>137,523,469</u>	<u>137,523,469</u>	<u>119,946</u>

Bartlett Regional Hospital

Cash Summary for July 2014

Increase/(Decrease) in Cash

	<u>Current Month</u>	<u>Year-To-Date</u>
CASH RECEIPTS	\$ 6,963,827	\$ 6,963,827
CASH DISBURSEMENTS:		
Payroll (Net Pay)	\$ 1,875,305	\$ 1,875,305
Accounts Payable	\$ 3,839,066	\$ 3,839,066
CBJ Cash Transactions	\$ 481,269	\$ 481,269
Bond Interest Payment	\$ 465,606	\$ 465,606
Total Cash Disbursements	\$ 6,661,246	\$ 6,661,246
NET CHANGE IN CASH	\$ 302,581	\$ 302,581
BEGINNING BALANCE	\$ 24,929,924	\$ 24,929,924
NET CHANGE IN CASH	302,581	302,581
ENDING BALANCE - OPERATING CASH	\$ 25,232,505	\$ 25,232,505

Board Designated Funds

Capital Reserve Fund	\$ 8,524,424
BRH CAMHU	\$ 2,500,000
Insurance Deductible Fund	\$ 125,764
Contributions	\$ 9,772
New Bond Debt Service Reserve	\$ 1,686,975
BRH Deposits	\$ 40,521
	\$ 12,887,456
	\$ 38,119,961

CBJ Appropriated Funds

CIP	\$ 484,920
CAMHU	5,000,000
	\$ 5,484,920

TOTAL CASH \$ 43,604,881

**Bartlett Regional Hospital
Capital Budget for FY15**

Description	Dept.	FY15
Meditech Upgrade	IS	\$ 4,130,237
Master Facility Plan	FAC	\$ 1,000,000
Next Generation Firewall and Web Security Solution	IS	\$ 215,000
Large Sterilizer	OR	\$ 156,494
Flashpad Digital X-Ray Conversion Kit	RAD	\$ 125,200
Storage 1 BAS Upgrade	FAC	\$ 125,000
Juneau Medical Center Fire Alarm System	FAC	\$ 100,000
Rainforest Recovery Center Fire Alarm	FAC	\$ 100,000
iU22 Ultrasound System (2 upgrades)	US	\$ 94,300
Video Towers for Surgical Procedures	OR	\$ 85,000
Agfa multi-plate CR Reader	RAD	\$ 79,652
10 Gig Comm Room Expansion	IS	\$ 79,000
Small Sterilizer	OR	\$ 76,915
2 Support Beds	CCU	\$ 69,936
840 Model Ventilator Upgrades	RT	\$ 61,009
Tissue Processor - Tissue Tek	HISTO	\$ 55,000
Film Coverslipper - Tissue Tek	HISTO	\$ 55,000
Chargemaster Toolkit	PHAR	\$ 52,800
Bartlett House Flooring	FAC	\$ 50,000
Risk Assessment/Penetration Testing	IS	\$ 48,000
CO2 Insufflation Device (Dr. Wagner)	OR	\$ 44,500
Bartlett Outpatient Psychiatric Service (BOPS) Deck Replacement	FAC	\$ 40,000
Rainforest Recovery Center 1991 Passenger Van Replacement	FAC	\$ 40,000
Mental Health Unit Passenger Van Replacement	FAC	\$ 40,000
2 Portable Monitors	OR	\$ 28,000
Large Frag Instrument Set and Screw Set	OR	\$ 27,193

**Bartlett Regional Hospital
Capital Budget for FY15**

Description	Dept.	FY15
DHS Instrument Set and Screw Set	OR	\$ 27,000
On Call Software	PAS	\$ 25,000
V-60 bipap Units	RT	\$ 24,000
New 840 Ventilator	RT	\$ 23,310
Powerscribe 360 DICOM SR Integration	IS	\$ 22,625
Pandora Software	PHAR	\$ 19,887
Retractor Tray	OR	\$ 16,111
Floor covering with anti fatigue and to reduce noise from boilers/ blood bank	FAC	\$ 13,000
Microbiology Refrigerator	LAB	\$ 9,000
Chemistry Refrigerator	LAB	\$ 9,000
Blood Bank Refrigerator	LAB	\$ 9,000
Warming Cabinet (PACU) Post Anesthesia Care Unit	OR	\$ 8,000
Accutor V Vital Signs Monitor and Accessories	M/S	\$ 7,327
Linen Warmer	OB	\$ 5,540
Pulmonary Function Testing	RT	\$ 5,441
Omni Rail and Blade Trays	OR	\$ 5,000
Total		\$ 7,207,476

Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900

www.bartlethospital.org

Planning Committee

August 21, 2014

Minutes

Called to order at 12:10 p.m.

Attendance: Dr. Nate Peimann, Mark Johnson, Mary Borthwick, Bob Storer

Staff attendance: Chuck Bill, CEO, Billy Gardner, CNO and Anita Moffitt

AGENDA ITEMS:

CEO Vision of Planning Committee roles and responsibilities – Mr. Bill is used to seeing the planning committee as an ad-hoc committee called together for specific projects to be discussed such as the Annual Strategic Plan, Child Adolescent Mental Health Unit (CAMHU), Facility Plans, Construction Updates and the Focus and Execute Tool, etc. This committee seems an unusual place for HR reports.

Meetings could be held quarterly with specific agendas of items to be discussed, and special meetings could be called as need arises.

City code requires that a committee handle physical plant and building concerns. This should include progress on projects. We should have a master list of equipment to plan for replacements and upcoming capital needs.

Informed decisions need to be made regarding the CAMHU. The State of Alaska is reporting that the numbers may not support the building of a CAMHU as planned. The plans for the CAMHU are to be revisited. If findings indicate that funding needs to be repurposed, options to be looked at would be reallocation of funding to enhance outpatient services for children/adolescents, downsizing the original CAMHU plans or looking at long term options for providing geriatric care to our aging community. Currently there very limited skilled nursing facilities in Juneau and they have long wait lists for patients.

Mr. Bill has informed the committee that the city is proposing to build an emergency bypass road by salmon creek trailhead. It is still unclear whether it is to be used just for emergencies or for every day usage.

Mr. Bill reports that a group called the “State of Reform” will be meeting in Anchorage on October 9 to discuss a variety of topics. Ms. Borthwick’s take on the group is that they

are a forward looking group looking at current and prospective laws. Since the committee is not familiar with this group, Chuck is to obtain feedback from ASHNHA to see if it would be beneficial for someone from BRH to attend.

Strategic Planning Retreat – The planning retreat is scheduled for October 18. It will be led by Dennis McMillian. David Sandberg from Focus and Execute will be in attendance as an observer only. He will meet with SLT on Monday to review goals and action plans to be presented to staff on Tuesday.

Holiday Bonuses – After some discussion, the committee concluded that holiday bonuses would be paid out again this year. It is still undecided as to what to call it and how it will be paid out. Mr. Bill is to make a recommendation at a later date.

Meeting adjourned at 1:07 p.m.

2014 SEPTEMBER

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	1	2	3	4 12:00 - BR Executive Committee 15:00 BR Compliance	5	6
7	8	9 7:00 - BR Credentials Committee	10 12:00 - BR Board Quality Council	11 12:00 - BR Board Planning Committee	12	13
14	15 12:00 - BR BRH Foundation	16	17	18 5:15 - BR Finance Committee	19	20
21	22	23 5:15 - BR Board of Directors	24	25	26	27
28	29	30				